

BEST AVAILABLE COPY

| CLAIMS ONLY | | APPLICANT(S) | | FILING DATE | |
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| CLAIMS | | * * * | | * * * | |
| AS FILED | | IND. DEP. | | IND. DEP. | |
| AFTER 1st AMENDMENT | | IND. DEP. | | IND. DEP. | |
| AFTER 2nd AMENDMENT | | IND. DEP. | | IND. DEP. | |
| TOTAL IND. | | TOTAL DEP. | | TOTAL CLAIMS | |
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